REMARKS

Claims 1-7 and 9-16 as amended are pending herein. Claims 8, and 17-22 have been cancelled.

Claim 1 has been amended to include the following features:

A) a urine receptor having an outlet aperture, the outlet aperture flaring out to a rim defining a perimeter of an inlet area into which a user urinates. This feature appeared in prior claim 1, but has been re-expressed in more definite form;

B) a generally elongate tubular member having an outlet end and an inlet end, the inlet end being connected to and extending from the outlet aperture of the urine receptor. This feature also appears in prior claim 1, but has been re-expressed in more definite form to make it clear that the tubular member has an outlet end together with an inlet end. The inlet end is connected to and extends from the outlet aperture of the urine receptor. It is intended that this feature is expressed in a form to cover the urine receptor being integrally formed with the urine receptor or being a separate component that is joined to the urine receptor (friction fit, glued, etc.);

C) the elongate tubular member further comprising a sampling outlet provided in a side surface thereof at a point intermediate the outlet end and the inlet end. This feature is a re-expression of the term "opening" previously appearing in line 6 of prior claim 1. This feature is intended to further define and clarify the location of the sampling outlet such that it is at some point along the length of the elongate tubular member between the inlet end and outlet end and is in a side surface of that tubular member;

D) the sampling outlet is formed as an open passage with one end extending from said side surface externally of the tubular member and defining a coupling for releasably mounting an open topped urine sample collection container thereto; and

E) the other end extending from the side surface internally of the tubular member and defining a flow director with an opening to the passage, the flow director having a raised elevation relative to that side surface and which is formed to direct urine flowing in the tubular member past the opening. These two features re-express the previously used terms "coupling means" and "flow director" and remove some of the prior functional language. In particular, this clause defines the sampling outlet, which is

located at some point along the length of the elongate tubular member, to define an open passage. The passage defines a coupling (previously the coupling member) at one end, while the passage defines a flow director with an opening at the other end which is at a raised elevation and is formed to direct urine flowing in the tubular member past the opening.

It is believed that amended claim 1 defines the present invention in clearer and more definite language which provides a more precise expression of the interrelationship and position of the various features.

The Examiner has rejected the present invention as being obvious in view of Lofley and Kuntz. Applicant courteously contends that the invention as defined in amended claim 1 is not obvious in view of a combination of these two documents.

Lofley discloses a urine receptor 11/13 having an outlet aperture, the outlet aperture flaring out to a rim defining a perimeter of an inlet area into which a user urinates. Lofley also discloses an elongate tubular member 12 having an outlet end and an inlet end, the inlet end being connected to and extending from the outlet aperture of the urine receptor. The document also discloses a sampling outlet provided in a side surface of the elongate tubular member at a point intermediate the outlet end and the inlet end. However, unlike the present invention, the sampling outlet in Lofley does not form an open passage with one end extending from said side surface externally of the tubular member. Instead, the sampling outlet described in Lofley comprises a closed passage extending from the side surface externally of the tubular member and defining a coupling for releasably mounting a urine sample collection container thereto. Moreover, the other end of the closed passage does not extend from the side surface internally of the tubular member and does not define a flow director with an opening to the passage and which flow director is at a raised elevation relative to that side surface and which is formed to direct urine flowing in the tubular member past the opening.

If the urine specimen collecting device of Kuntz is considered, the disclosure in this document describes forming a hollow cylinder 12 with a partition 24 to split the cylinder into a lower portion 16 and an upper portion 14. The partition 24 forms the base of the upper portion such that an open topped urine receptor 14 is formed with the

perimeter of the upper portion defining an inlet area into which a user urinates.

A sampling outlet is provided in the base of the urine receptor 14. This sampling outlet takes the form of an open passage, a stand pipe 26, which passes through the partition 24 into the lower portion 16 to terminate in a mounting for connecting to a urine specimen container 18. The standpipe 26, as the noun "standpipe" suggests, takes the form of a simple open pipe which terminates at an opening higher relative to the base of the urine receptor 14.

A small urine flow exit 34 is provided to one side from the base of the urine receptor 14 to allow the bleeding off of the initial flow of an individual's urine while a large urine flow exit 72 is provided just below the rim of the urine receptor. In use, an individual locates the cylinder 12 such that he or she can urinate into the inlet area of the urine receptor 14.

The very first urine flow enters into the urine receptor from various angles around the rim according to the manner by which the device is held and passes down channel 30 and exits through the small urine exit 34. In this respect, it should be noted that during the initial phase of urination, the only flow route that can be ascertained is that the urine flows down channel 30, the actual flow within the urine receptor 14 will depend on the angle of urination into the urine receptor 14 and even then, there should, according to the disclosure, be no build up of urine in the receptor 14 and hence there is no flow within the receptor 14 itself. Thus, there may or may not be urine flow past the standpipe 26. It is therefore clear that the standpipe has no function of directing urine flow and is certainly not formed with that intent. Indeed, in the absence of urine flow, there is no upstream or downstream.

As the urine flow builds up, the small urine exit 34 is insufficient for the flow rate such that the urine receptor 14 begins to fill up with urine. In this respect, the urine starts to pool on the base of the urine receptor and the level increases. It will be apparent that at this point in time there is no actual flow of urine within the urine receptor 14 other than urine from the individual, which is coming into the receptor at irregular angles. In particular, as the urine pools on the base of the receptor 14, it will encircle the standpipe 26. Thus, once again there is no urine flow past the standpipe so it is clear that the

standpipe has no function of directing urine flow and is certainly not formed with that intent. Indeed, in the absence of urine flow, there is no upstream or downstream.

The urine level in the urine receptor increases until the depth of the urine pooling on the base of the urine receptor reaches the level of the standpipe. At this point in time, urine will overflow into the standpipe and into the urine specimen container 18. Again, it should be noted that there is no urine flow within the urine receptor 14 itself and thus there is no directing of urine flow taking place. Instead, the urine level is simply increasing to a point where it starts to overflow down the standpipe 26.

Once the urine specimen container is full, the urine level in the urine receptor increases until it reaches the level of the larger urine exit 72 at which point urine will overflow through that exit and down a separate passageway 44 and out of the bottom of the cylinder 12 and into the toilet. It should be noted that when the urine in the urine receptor overflows into the passageway 44, there is still no upstream or downstream urine flow relative to the standpipe 26.

Thus, the technical principle of the device in Kuntz is that it functions by having a urine receptor or container into which an individual urinates. An initial bleed of urine from the urine receptor (which does not define a flow as such within the receptor) is insufficient to stop the urine level pooling on the base of the receptor and rising in the urine receptor until the urine level reaches the open top of the standpipe in the base of the urine receptor to enable urine to overflow into an attached urine specimen container. Thereafter, once the urine specimen container is full, the urine level in the receptor rises until it reaches a urine outlet and overflows down passageway 44 and into the toilet. It should be noted that the initial bleed of urine from the urine receptor 14 is essential otherwise the device of Kuntz will not collect a mid-stream urine sample since the entire initial urine flow from the individual will be collected in the urine receptor 14. It is clear that while the standpipe has a raised elevation relative to the base of the urine receptor, it does not and can not act to direct urine past the opening. Instead, it simply functions as a standpipe in a pool of urine.

The Examiner argues that the present invention is obvious in view of Lofley combined with Kuntz. At most, combining the technical teaching of Kuntz to the

disclosure of Lofley would lead to some form of standpipe being located in the surface of the urine receptor 11/13, with the urine sample collecting container on the other side of the urine receptor and releasably attached to the standpipe so that urine can collect in the urine receptor 11/13 sufficient to overflow into the urine sample collecting container. There is no suggestion or reason for the standpipe of Kuntz to be located anywhere other than in the urine receptor 11/13. Moreover, as described above, there is no effective urine flow direction in Kuntz other than out of the urine receptor 14 into the passage 44. Kuntz is entirely concerned with pooling urine in the urine receptor 14 sufficiently to enable urine to overflow into standpipe 26, and then as the urine receptor 14 further fills, to overflow into passage 44. There is no suggestion of a flow director to direct urine past the opening leading to the urine sample collection container. Consequently, a combination of Lofley and Kuntz requires the two further steps of a) relocating the standpipe away from the urine receptor, when the entire disclosure in Kuntz is reliant on a pooling of urine in the urine receptor 14 until the urine depth rises sufficiently to overflow into the standpipe, and b) having a passage from the urine sample collection container formed into a flow director so as to direct urine flow past the opening of the passage.

It is submitted that neither of the above mentioned two steps are mentioned or suggested in either Lofley or Kuntz. For the above reasons, it is submitted that the invention defined in amended claim 1 is both novel and involves an inventive step having regard to the cited prior art.

Applicant courteously solicits allowance of claims 1-7 and 9-16.

Please charge any government fees required for entry of this response or credit any overpayment to Deposit Account 50-1936.

Respectfully submitted,

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